

10/532668

JC10 Rec'd PCT/PTO 26 APR 2005

Martin G. Linihan
Partner
Direct Dial: 716.848.1367
mlinihan@hodgsonruss.com

(Express Mail) mailing label
Number ER 636708101 US

Hodgson Russ LLP
ATTORNEYS

Date of Deposit April 26, 2005

I hereby Certify that this paper or fee is being deposited with the United States Postal Service (Express Mail Post Office to Addressee service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450

Martin G. Linihan

Name

Signature

Date

Martin G. Linihan
April 26, 2005

April 26, 2005

Mail Stop PCT
Commissioner for Patents
Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Re: Entry into the United States National Phase
International Patent Application No. PCT/JP2004/17880

Enclosed for filing for entering the national stage under 35 USC 371 is a check for \$500 for payment of the basic national stage fee, national stage search fee and national stage examination fee together with a copy of the International Application. Applicant claims small entity status. Also enclosed are a Preliminary Amendment to be entered upon filing of the national stage application and a copy of the PCT Request.

The executed Declaration and Power of Attorney also is enclosed.

If there is any deficiency in the basic national fee or processing fees at this time or during the pendency of this application, please charge such deficiency, or credit any overpayment, to Deposit Account No. 08-2442 of applicant's attorneys. A duplicate of this letter is enclosed for that purpose.

Respectfully submitted

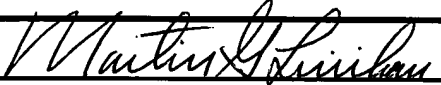
Martin G. Linihan

Martin G. Linihan
Reg. No. 24,926

MGL/ka
encs.

30033/0010 BFLODOCS 1234288v1

Effective on 12/08/2004 Fees pursuant to Consolidated Appropriations Act. 2005 (H.R. 4818)		Complete if Known		
FEE TRANSMITTAL For FY 2005		Application Number		
		Filing Date		
		First Named Inventor		
		Examiner Name		
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit		
TOTAL AMOUNT OF PAYMENT (\$40.00)		Attorney Docket No. 30033.0010		
METHOD OF PAYMENT (check all that apply)				
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input type="checkbox"/> Deposit Account Deposit Account Number: <u>08-2442</u> Deposit Account Name: <u>Hodgson Russ LLP</u> For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Credit any overpayments				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
FEE CALCULATION				
1. BASIC FILING, SEARCH, AND EXAMINATION FEES				
	FILING FEES		SEARCH FEES	EXAMINATION FEES
	Small Entity		Small Entity	
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>
Utility	300	150	500	200
Design	200	100	100	130
Plant	200	100	300	160
Reissue	300	150	500	600
Provisional	200	100	0	0
				Fees Paid (\$)
2. EXCESS CLAIM FEES				
<u>Fee Description</u>				<u>Small Entity</u>
				<u>Fee (\$)</u>
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent				50
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent				200
Multiple dependent claims				360
				Fees Paid (\$)
<u>Total Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
-20 or HP = _____		x _____	= _____	
HP = highest number of total claims paid for, if greater than 20				
<u>Indep. Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
-3 or HP = _____		x _____	= _____	
HP = highest number of independent claims paid for, if greater than 3				
3. APPLICATION SIZE FEE				
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).				
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 = _____	/ 50 = _____	(round up to a whole number) x _____	= _____	
4. OTHER FEE(S)				<u>Fees Paid (\$)</u>
Non-English Specification, \$130 fee (no small entity discount)				
Other: <u>Assignment recording fee</u>				\$40.00

SUBMITTED BY		
SIGNATURE		Registration No. (Attorney/Agent) 24,926 Telephone 716-856-4000
NAME (Print/Type)	Martin G. Linihan	Date April 26, 2005

Express Mail Mailing Label Number ER 636708101 US

Date of Deposit April 26, 2005

I hereby Certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office To Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Martin G. Linihan
Name

Signature

April 26, 2005
Date of Signature